GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:6372
ANSWERED ON:08.05.2002
CHILDREN FALL SICK DUE TO VITAMIN - A SOLUTION
SUSHIL KUMAR SAMBHAJIRAO SHINDE

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

to the reply given to Unstarred Question No. 1600 dated 28.11.2001 and state:

(a) whether the High Level Committee of experts constituted to go into various programmatic and technical aspect relating to Vitamin-A administration has submitted its report to the Government;

(b) if so, the details thereof alongwith the reaction thereto; and

(c) if not, the time by which the result of the probe is likely made available?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA)

(a) to (c) A statement is annexed.

STATEMENT REFERRED TO IN REPLY TO PART (a) TO (c) OF LOK SABHA UNSTARRED QUESTION NO.6372 TO BE ANSWERED ON 8.5.02

The Committee constituted to go into various programmatic and technical aspects related to Vitamin A administration has submitted its report. The Committee, inter-alia, has observed that Vitamin A deficiency is only one of the many specific nutrient deficiencies which are prevalent in children in India. These include deficiencies of energy, iron, folic acid, zine, B vitamins and others. The Committee emphasizes the need for evolving a holistic approach to combat these deficiencies. As for as Vitamin A deficiency is concerned, the Committee opined that the magnitute of Vitamin A deficiency has declined significantly, although it exists as a public health problem in some areas.

The Committee has endorsed the current policy of Vitamin A supplementation to children between 9-36 months of age at 6 monthly intervals as per the existing policy for the next five years. At the end of this period, the Committee recommends that the policy should be reviewed. The Committee also recommends the discontinuation of the campaign mode for administration of Vitamin A. The Ministry of Health and Family Welfare has already advised all States to refrain from launching campaigns of VitaminA but also for other individual interventions, since campaigns have a tendency to divert the attention of the entire system from regular essential services. The Committee has also made some technical recommendations of issues like `spoon` size fro giving Vitamin A Solution; use of Vitamin A during pregnancy and lactation; involvement of NGOs for community mobilization and increasing outreach; sensitization of districts administration and media etc.

The Committee recommends `special efforts` to improve coverage with the entire package of reproductive and child health services, at periodic intervals, in districts/regions where programme performance is sub optimal. The Committee also recommends that a task force be set up to develop a concrete action programme for strengthening health and nutrition services through a health system approach to realize the full potential of the delivery of these interventions. These recommendations will be implemented taking into consideration the existing constraints and resource-requirements.

The Committee has also made observations about the Vitamin A campaign programme held in Assam in November, 2001. the Committee observed that the incidence of side effects in children ranged from 0.29-0.48 per cent. This is lower than the expected level, since published literature suggests that the incidence of side effects can very from 1.5-7.0 per cent. Replacement of the 2 ml spoons, generally used in the National Programme for administering Vitamin A solution with 5 ml cups during the campaign might have led to over dosing in some cases. Some reports suggest that during training, the health workers were not adequately informed about side effects of Vitamin A and its management. The community and the district administration were also not made aware of the possible side effects of Vitamin A. The Committee also addressed the issue of whether Vitamin A administration contributed to any of the reported deaths during the campaign. The Committee is of the view that a review of the available evidence suggests that the majority of children who died during the Vitamin A campaign had pre-existing illness of sufficient severity which could explain the death. The Committee states that worldwide experience shows that Vitamin A administered according to WHO guidelines is not associated with additional risk of death.